UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

hours per response	16.00
SEC USE ONLY	
Prefix	Serial
DATE RECEIVED)

Name of Offering ([] check if this is an an	nendment and name has chang	ged, and indicate ch	ange.) Issuance o	f Series B Convertible Parti	
Filing Under (Check box(es) that apply): Type of Filing: [X] New Filing [] Amer	[] <u>Rule 504</u> idment	[] <u>Rule 505</u>	[X] <u>Rule 506</u>	[] Section 4(6)	SPULOE FER 1 0 2005
	<u>A</u> .	BASIC IDENTIFIC	ATION DATA	<i></i>	
Enter the information requested about	the issuer				185/4
Name of Issuer ([] check if this is an am	endment and name has chang	ed, and indicate cha	ange.) Duck Cree	k Technologies, Inc.	
Address of Executive Offices (Number a (417) 777-6970	and Street, City, State, Zip Code	e) 1807 W. Aldrid	ch Road; Bolivar, M	issouri 65613 Telephone	Number (Including Area Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, St	ate, Zip Code) Te	elephone Number (I	ncluding Area Code)	
Brief Description of Business Insurance soft	ware and services				
Type of Business Organization					
[X] corporation	[] limited partnership,	already formed		[] other (please specify):	DDAAFAAF
[] business trust	[] limited partnership,	to be formed			PROCESSEI
		M	onth Year		○ FEB 1 4 2005
Actual or Estimated Date of Incorporation	or Organization:	[01]	[00]	[X] Actual [] Estimate	ed // THOMSON
Jurisdiction of Incorporation or Organizati	on: (Enter two-letter U.S. Posta CN for Canada; FN for other for		on for State: [M][O]		THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee. State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



	P 1010	100	take the s	~ . ~		D A T A
•	BASIC	1111-0	4 I I F I	(. A	II JN	11414

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Code	Officer [] Director [] General and/or
Full Name (Last name first, if individual)	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive C	Officer [] Director [] General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual)	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive C	Officer [] Director [] General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual)	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive C	Officer [] Director [] General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual)	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive C	Officer [] Director [] General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual)	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive O	Officer [] Director [] General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)	
Full Name (Last name first, if individual) SEE ATTACHED EXHIBIT A	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive O	Officer [] Director [] General and/or Managing Partner
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive O	

L					B. i	NEORINA	ATION AD	SOUT OF	FERING			
1. Has		er sold, o	r does th	e issuer i	intend to	sell, to no	n-accredi	ted invest	ors in this		Yes []	No [X]
	Answer also in Appendix, Column 2, if filing under ULOE.											
2. Wha	2. What is the minimum investment that will be accepted from any individual?\$500,000											
3. Doe	s the offe	ering peri	mit joint o	wnership	of a sing	le unit?					Yes []	No [X]
indirec sales c or deal more th	tly, any c of securiti er registe nan five (commissices in the ered with (5) perso	on or sim offering.	ilar remu If a perse and/or v isted are	neration fon to be I with a state associate	for solicita isted is ar e or state	ation of pu n associat s, list the	irchasers ted persor name of t	or given, in connec n or agent he broker or dealer,	tion with of a brok or dealer	er :. If	
Full Na	me (Las	t name fi	rst, if indi	vidual) i	Not Appli	cable						
Busine	ss or Re	sidence /	Address	(Number	and Stree	et, City, S	tate, Zip (Code)				
Name	of Assoc	iated Bro	ker or De	ealer								
					ed or Inte		licit Purch	nasers		۲.	All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	 [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[/ <u>—</u>]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[] [MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Las	t name fi	rst, if indi	vidual)								
Busine	ss or Re	sidence ,	Address	(Number	and Stree	et, City, S	tate, Zip (Code)				
Name	of Assoc	iated Bro	ker or De	ealer								
					ed or Inte		licit Purch	nasers		[]	All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ıme (Las	t name fi	rst, if indi	vidual)								
Busine	ss or Re	sidence ,	Address	(Number	and Stree	et, City, S	tate, Zip (Code)				
Name	of Assoc	iated Bro	ker or De	ealer								
					ed or Inte)		licit Purch	nasers		[]] All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Time of County	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$7,000,080	\$7,000,080
	[] Common [X] Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify).	\$	\$
	Total	\$7,000,080	\$7,000,080
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
			Aggregate Dollar Amount
		Number Investors	of Purchases
	Accredited Investors	2	\$7,000,080
	Non-accredited Investors	-0-	\$-0-
	Total (for filings under Rule 504 only)	•	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		·
3	If this filing is for an offering under $\underline{\text{Rule }504}$ or $\underline{505}$, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		50lu e
			Ď
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	***************************************	[]\$ -0
	Printing and Engraving Costs		[]\$ -0
	Legal Fees		[X] \$ 80,000
	Accounting Fees		[X] \$ 30,000
	Engineering Fees.		[]\$ -0
	Sales Commissions (specify finders' fees separately)		[]\$ -0
	Other Expenses (identify) Escrow Agent, Bank fees, etc. Travel, etc.		[X] \$ 10,000
	Total		
	U(a)		[X] \$ 120,00

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
	and total expenses furnished in response to Part	e offering price given in response to Part C — Question C — Question 4.a. This difference is the "adjusted grant of the contract of the contra	oss	\$ <u>6,880,080</u>
5.	each of the purposes shown. If the amount	ess proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate a otal of the payments listed must equal the adjusted groo Part C — Question 4.b above.	ind	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🗀 \$. 🗆 \$
	Purchase of real estate		🗆 \$	\$
	Purchase, rental or leasing and installation of	f machinery		
				············
		nd facilities	🔲 \$. 🗆 \$
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	ne value of securities involved in this e assets or securities of another	□\$	□\$
				
				
		eries A Preferred Stock		
			🔲 Ψ	<u> </u>
			_ 	\$
	Column Totals		🔲 \$	〒 \$6,880,080
	Total Payments Listed (column totals added))	🗓 \$6,	880,080
		D. FEDERAL SIGNATURE		
sig	nature constitutes an undertaking by the issuer	by the undersigned duly authorized person. If this no to furnish to the U.S. Securities and Exchange Com n-accredited investor pursuant to paragraph (b)(2)	mission, upon writte	
SS	uer (Print or Type)	Signature	Date	
]	Duck Creek Technologies, Inc.	of the tolefour	February	2, 2005
۷a	me of Signer (Print or Type)	Title of Signer (Print or Type)		
'n	Brent DeRossett	Chief Financial Officer		

- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No X	
	See Appendix, Column 5, for state response.			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Duck Creek Technologies, Inc.	I HELLE MERCHALLET	February 2, 2005
Name (Print or Type)	Title (Print or Type)	
Brent DeRossett	Chief Financial Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to no accred investo State (Part B-I	to sell on- dited ors in te	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL					AND THE RESERVE TO THE PARTY OF				
AK									
AZ									namal religion for foreignments (1914a) MAN, John Joseph
AR									
CA									
CO									
СТ		X		2	7,000,080	-0-	-0-		X
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									CONTRACTOR OF THE STATE OF THE
KY									
LA									
ME									
MD									
MA									
MI									
MN			e-quermo de rata a mangalista - attra quad . L'altra parte para la cale	1					
MS	<u> </u>								

APPENDIX 3 5 2 1 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach offering price to non-accredited Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No **Investors Amount Investors Amount** Yes No MO ΜT ΝE NV NH NJ NM NY NC ND ОН OK OR PΑ RI SC SD TN TX UT VT VA WA

WV WI

	APPENDIX									
1	2		3 Type of security	4				5 Disqualification under State ULOE		
	Intend to non-ac investors (Part B-	credited	and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				(if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY							,			
PR										

EXHIBIT A TO FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

DUCK CREEK TECHNOLOGIES, INC.

A.2. BASIC IDENTIFICATION DATA

Full Name	Business Address	
Roller, William D.	Duck Creek Technologies, Inc. 1807 West Aldrich Road Bolivar, Missouri 65613	Promoter, Beneficial Owner, Executive Officer, Director
Roller, John M.	Duck Creek Technologies, Inc. 1807 West Aldrich Road Bolivar, Missouri 65613	Promoter, Executive Officer, Director
Yohn, Andrew K.	Duck Creek Technologies, Inc. 1807 West Aldrich Road Bolivar, Missouri 65613	Promoter, Executive Officer, Director
DeRossett, Brent W.	Duck Creek Technologies, Inc. 1807 West Aldrich Road Bolivar, Missouri 65613	Promoter, Executive Officer, Director
West, Jeff	Duck Creek Technologies, Inc. 1807 West Aldrich Road Bolivar, Missouri 65613	Promoter, Executive Officer, Director
Liston, Dean	Duck Creek Technologies, Inc. 1807 West Aldrich Road Bolivar, Missouri 65613	Director